

NPM 18: *Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.*

Annual Objective and Performance Data	Tracking Performance Measures (Sec 485 (2)(2)(B)(iii) and 486 (a)(2)(A)(iii))				
	2000	2001	2002	2003	2004
Annual Performance Objective	84.0	84.1	84.2	84.7	85.0
Annual Indicator	83.9	83.7	84.2	84.7	85.0
Numerator	58129	57747	57686	59296	
Denominator	69289	69012	68510	69999	
Is Data Provisional or Final				Final	Provisional
	2005	2006	2007	2008	2009
Annual Performance Objective	85.5	86.0	87.0	88.0	90.0

Notes - 2002

Source: Numerator and Denominator: Wisconsin Department of Health and Family Services, Wisconsin Division of Health Care Financing, Bureau of Health Information, Wisconsin Births and Infant Deaths, 2001. Madison, Wisconsin, 2003. Data issues: Data for 2002 are not available from the Bureau of Health Information until mid-2004.

Notes - 2003

Source: Numerator and Denominator: Wisconsin Department of Health and Family Services, Division of Public Health, Bureau of Health Information and Policy, Wisconsin Births and Infant Deaths, 2003, October 2004.

Notes - 2004

Data for 2004 are not available from the Bureau of Health Information and Policy until 2006.

a. Last Year's Accomplishments

Impact on National Outcome Measures: NPM #18 relates to National Outcome Measures #1 Infant mortality rate, #2 Disparity between Black and White IMR, #3 Neonatal mortality rate, and #5 Perinatal mortality rate. The overall proportion of Wisconsin women who received first trimester prenatal care was 84.7% in 2003, compared to 82% in 1993. The proportion with first trimester care increased in each age group and each race/ethnic group.

1. Title V MCH/CSHCN Program MCH Funded Perinatal Service--Enabling Services--Pregnant women, mothers, infants

In 2004, the Title V MCH/CSHCN Program funded 32 LHDs totaling 36 objectives addressing perinatal care coordination, prenatal/postnatal education, early entry into prenatal care, prenatal smoking cessation and perinatal depression screening.

2. Prenatal Care Coordination (PNCC)--Enabling Services--Pregnant women, mothers, infants

PNCC services are available to Medicaid-eligible pregnant women with a high-risk for adverse pregnancy outcomes to ensure early and continuous prenatal care, psychosocial support and services, health and nutrition education, and referral to community services as needed. In State Fiscal Year 2004, 8787 women received PNCC services from 104 providers. The Title V MCH/CSHCN Program staff collaborated with DHCF on several initiatives to support the PNCC program and providers. The initial assessment tool for the PNCC program was revised to be

more user-friendly, allow for coordination with WIC, and allow for data collection. Pilot testing and evaluation of the revised Pregnancy Questionnaire was completed. Educational sessions on Medicaid case management programs were held at 5 sites across the state. Also, a survey was completed with a sample of WIC and PNCC sites to identify barriers to receiving both services as well as service delivery models that support WIC/PNCC dual participation. Funding for the survey was from the USDA for a WIC Special Projects Concept Paper.

3. Federal Healthy Start Projects in Wisconsin--Population-Based Services--Pregnant women, mothers, infants

The Title V MCH/CSHCN program staff participated in a national Healthy Start meeting and local meetings with the Milwaukee Healthy Beginnings Project of the Black Health Coalition and the Honoring Our Children Project of Great Lakes Inter-Tribal Council. Title V Program staff presented information for the Native American Healthy Babies Action Team and provided consultation on Prenatal Care Coordination services. There was collaboration with the MHBP on the Healthy Babies initiative, the Racial and Ethnic Disparities in Birth Outcomes Action Team and the Milwaukee Fetal Infant Mortality Review Program. MHBP held an African American Community Strategic Planning Meeting on infant mortality and co-sponsored the March of Dimes Prematurity Summit and a town hall meeting with African American physicians in Milwaukee.

Activities	Pyramid Level of Service			
	DHC	ES	PBS	IB
1. Title V funded Perinatal Services		X		
2. Prenatal Care Coordination		X		
3. Federal Healthy Start Projects			X	

b. Current Activities

1. Title V MCH/CSHCN Program MCH Funded Perinatal Service--Enabling Services--Pregnant women, mothers, infants

For 2005, the Title V MCH/CSHCN Program funded 32 LHDs totaling 35 objectives to do perinatal care coordination services, prenatal/postnatal education, early entry into prenatal care, prenatal smoking cessation and perinatal depressions screening.

2. Prenatal Care Coordination (PNCC)--Enabling Services--Pregnant women, mothers, infants

The Title V MCH/CSHCN Program is collaborating with the DHCF to finalize revisions of the PNCC initial assessment tool and plan statewide implementation. The revised Pregnancy Questionnaire is a screening tool to begin the assessment process and identify women with increased risk of adverse pregnancy outcomes including premature delivery, low birth weight baby, and fetal/infant mortality. Questions relate to risk factors such as tobacco use during pregnancy, previous adverse birth outcomes, and other demographic, medical, and psychosocial factors. Follow-up assessment questions are identified to assist with ongoing assessment over time. Educational session will be offered to all PNCC providers to coincide with statewide implementation of the revised Pregnancy Questionnaire. The training will include education on strength-based approaches to complete the initial assessment, smoking cessation, prematurity, and other topics.

To build on PNCC services, a prenatal component was included in a Milwaukee Comprehensive Home Visiting Program scheduled to begin 7-1-05. The program will provide services for pregnant women in their first trimester continuing through age 4 of the child in targeted areas of Milwaukee with the highest infant mortality rates. Goals of the program are to: a) reduce

premature birth, infant mortality, and child abuse and neglect, b) improve family functioning, and c) promote child health, safety, and development.

3. Federal Healthy Start Projects in Wisconsin--Population-Based Services--Pregnant women, mothers, infants

The Title V MCH/CSHCN Program staff serve on steering/advisory committees for both Healthy Start projects in the state. The Black Health Coalition and Great Lakes Inter-Tribal Council are key partners of the Healthy Babies initiative. The Milwaukee Healthy Beginnings Project and the Honoring Our Children Project both provide services to increase first trimester prenatal care and decrease VLBW and infant mortality including outreach, education, case management, referral and follow-up services.

c. Plan for the Coming Year

1. Title V MCH/CSHCN Program MCH Funded Perinatal Service--Enabling Services--Pregnant women, mothers, infants

The Title V MCH/CSHCN Program anticipates continuing to contract with LHDs for perinatal care coordination services.

2. Prenatal Care Coordination (PNCC)--Enabling Services--Pregnant women, mothers, infants

The Title V MCH/CSHCN Program will continue to collaborate with DHCF to provide support and technical assistance for the PNCC program and providers. Outreach and quality improvement initiatives will continue to assure care coordination services are available to pregnant women at risk for adverse outcomes. A series of educational sessions will be provided to PNCC providers participating in the Milwaukee Comprehensive Home Visiting Program.

3. Federal Healthy Start Projects in Wisconsin--Population-Based Services--Pregnant women, mothers, infants

The Title V MCH/CSHCN Program will continue to serve on advisory committees for the Healthy Start projects and participate in the Milwaukee FIMR program. The collaborative efforts of many partners will continue to sustain the Healthy Babies initiative.